

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>	<i>12</i>	<i>9/13/0</i>
O.I.P.E. CLASSIFIER		<i>7/435</i>	<i>9/19</i>
FORMALITY REVIEW			<i>7/23/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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